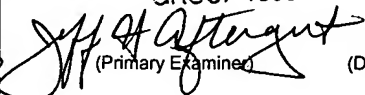

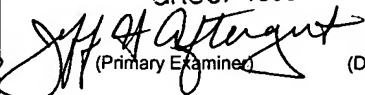



**Issue Classification**


Application/Control No.	Applicant(s)/Patent under Reexamination	
10/728,138	PROVOST ET AL.	
Examiner	Art Unit	
Jeff H. Aftergut	1733	

ISSUE CLASSIFICATION												
ORIGINAL					CROSS REFERENCE(S)							
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)						
156		148			156	72						
INTERNATIONAL CLASSIFICATION												
B	3	2	B	37/00								
				/								
				/								
				/								
				/								

----- (Assistant Examiner) (Date)		JEFF H. AFTERGUT PRIMARY EXAMINER GROUP 1300  (Primary Examiner) (Date)		Total Claims Allowed: 92	
 (Legal Instruments Examiner)		 (Primary Examiner)		O.G. Print Claim(s) 1	
8/25/06 (Date)		8/24/06 (Date)		O.G. Print Fig. 2C, 2D	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant						<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original		Final	Original		Final	Original		Final	Original	
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	3		14	33		35	63		61	123	183
3	4			34			64		62	124	184
	5		15	35			65		63	125	185
4	6		16	36			66		64	126	186
	7		17	37			67	50		127	187
	8		18	38			68		65	128	188
	9		19	39			69	51		129	189
5	10		20	40	36	70	52	100	66	130	190
	11		21	41		71	53	101	67	131	191
	12		22	42		72		102	68	132	192
	13		23	43		73		103	69	133	193
	14			44		74		104	70	134	194
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	17			47	37	77		107	73	137	197
	18			48	38	78		108	74	138	198
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	21			51	41	81	55	111	77	141	201
8	22			52	42	82	56	112	78	142	202
9	23			53		83	57	113	79	143	203
10	24		27	54		84	58	114	80	144	204
11	25		28	55		85	59	115		145	205
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	27		30	57	43	87		117		147	207
	28		31	58	44	88		118		148	208
12	29			59	45	89		119		149	81 209
	30		32	60	46	90		120		150	82 210

<b>Issue Classification</b> 	<b>Application/Control No.</b>		<b>Applicant(s)/Patent under Reexamination</b>	
	10/728,138		PROVOST ET AL.	
	<b>Examiner</b>		<b>Art Unit</b>	
	Jeff H. Aftergut		1733	

ISSUE CLASSIFICATION									
ORIGINAL				CROSS REFERENCE(S)					
CLASS	SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
INTERNATIONAL CLASSIFICATION									
			/						
			/						
			/						
			/						
			/						
								<b>Total Claims Allowed:</b>	
(Assistant Examiner) (Date)								O.G. Print Claim(s)	
 (Legal Instruments Examiner)				(Primary Examiner)				O.G. Print Fig.	
8/25/06 (Date)									

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
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	237		267		297		327		357		387		417		447
	238		268		298		328		358		388		418		448
	239		269		299		329		359		389		419		449
	240		270		300		330		360		390		420		450